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		Application Number	10/716,365
		Filing Date	11/18/2003
		First Named Inventor	Tom Lalor
		Art Unit	3643
		Examiner Name	
Total Number of Pages in This Submission		Attorney Docket Number	1013-00029

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Cited references Return receipt postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Jeffrey S. Sokol (Reg. No. 35,686) Andrus, Sceales, Starke & Sawall, LLP
Signature	
Date	2/26/04

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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application Of:

TOM LALOR

Application No. 10/716,365

Filed: 11/18/2003

Group Art Unit: 3643

Examiner:

AUTOMATED ANIMAL RETURN SYSTEM

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Veronica K. Haupt 2-27-04
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INFORMATION DISCLOSURE STATEMENT

MAIL STOP: NO FEE
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Sir:

Pursuant to revised Rules 56 and 98, the Applicant would like to make of record the patents listed on the attached PTO Form 1449. These documents may be material to the patentability of the above-captioned invention. Copies of these documents are enclosed.

Since no Office Action has been received on the application, it is believed that no fee is due in connection with this Statement. However, if a fee is due, this is your authorization to charge Deposit Account No. 01.2000 for any such fee.

Respectfully submitted,

ANDRUS, SCEALES, STARKE & SAWALL, LLP

By 
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Form PTO-146 U.S. Department of Commerce Patent and Trademark Office		Atty. Docket No. 1013-00029	Appln. No.: 10/716,365
INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use several sheets if necessary)		Applicant Tom Lalor	
		Filing Date 11/18/2003	Group Art Unit 3643

U.S. PATENT DOCUMENTS							
*EXAMINER INITIAL		DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE IF PPROPRIATE
		6,651,592	11/25/2003	Maddox et al.	119	720	
		6,431,122	08/13/2002	Westrick et al.	119	721	
		6,163,261	12/19/2000	Westrick	340	573.3	
		5,207,179	05/04/1993	Arthur et al.	119	29	
		4,745,882	05/24/1988	Yarnall, Sr. et al.	119	29	
		3,753,421	08/21/1973	Peck	119	29	

FOREIGN PATENT DOCUMENTS							
		DOCUMENT NUMBER	DATE	COUNTRY	CLASS	SUBCLASS	TRANSLATION Yes No

OTHER REFERENCES (Including Author, Title, Date, Pertinent Pages, Etc.)		

EXAMINER	DATE CONSIDERED

*Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to client.